



UNITED STATES PATENT AND TRADEMARK OFFICE

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JUNE 01, 2007

PTAS - LW



103410265A

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UNITED STATES PATENT AND TRADEMARK OFFICE
NOTICE OF RECORDATION OF ASSIGNMENT DOCUMENT

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RECORDATION DATE: 05/01/2007

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BRIEF: ASSIGNMENT OF ASSIGNOR'S INTEREST (SEE DOCUMENT FOR DETAILS).

ASSIGNOR:
MILOT, ERIC

DOC DATE: 09/11/2006

ASSIGNEE:
D.I.T. EQUIPEMENTS INC.
1400 MARIE-VICTORIN #201
ST-BRUNO, QUEBEC, CANADA J3V 6B9

SERIAL NUMBER: 10586944

FILING DATE:

PATENT NUMBER:

ISSUE DATE:

TITLE: APPARATUS FOR LONGITUDINALLY ALIGNING CONCRETE BLOCKS ON A CONVEYOR

ASSIGNMENT SERVICES BRANCH
PUBLIC RECORDS DIVISION

05-30-2007



103410265

To the Director

1. Name of conveying party(ies)

Eric Milot

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

3. Nature of conveyance/Execution Date(s):

Execution Date(s) 11 September 2008 (11.09.2008)

- ☒ Assignment ☐ Merger
☐ Security Agreement ☐ Change of Name
☐ Joint Research Agreement
☐ Government Interest Assignment
☐ Executive Order 9424, Confirmatory License
☐ Other

4. Application or patent number(s):

A. Patent Application No.(s)
10/586,944

☐ This document is being filed together with a new application.
B. Patent No.(s)

05/04/2007 MKAYPAGH 0000106 10586944

02 FC:B021

40.00 DP

Additional numbers attached? ☐ Yes ☒ No

5. Name and address to whom correspondence concerning document should be mailed:

Name: Robert C. Hyta

Internal Address: Wells St. John P.S.

Street Address: 601 West First Ave., Suite 1300

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9. Signature:

Signature

Robert C. Hyta

Name of Person Signing

FORM COVER SHEET

S ONLY

Record the attached documents or the new address(es) below.

2. Name and address of receiving party(ies)

Name: D.I.T. Equipements Inc.

Internal Address: 1400 Marie-Victorin #201

Street Address:

City: St-Bruno

State: Quebec

Country: CANADA Zip: J3V 6B9

Additional name(s) & address(es) attached? ☐ Yes ☒ No

6. Total number of applications and patents involved: One (1)

7. Total fee (37 CFR 1.21(h) & 3.41) \$40.00

- ☐ Authorized to be charged by credit card
☐ Authorized to be charged to deposit account
☒ Enclosed
☐ None required (government interest not affecting title)

8. Payment Information

a. Credit Card Last 4 Numbers _____
Expiration Date _____

b. Deposit Account Number 23-0925 (delinquency)

Authorized User Name Wells St. John P.S.

Date

Total number of pages including cover sheet, attachments, and documents:

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